

YOUR RECENT REQUEST HAS BEEN ACTED UPON AS INDICATED BELOW:

DATE RECEIVED	TOTAL AMOUNT	AMOUNT THIS REQUEST	PROCESSING FEE REQUIRED	REFUND
03/29/2023	14.00	14.00	0.00	0.00

UNAPPLIED REMITTANCES ONLY VALID FOR ONE YEAR AFTER RECEIPT. When you inquire about please return this receipt. If a refund is indicated, it will be mailed within 30 to 60 days.

STATE OF MISSOURI

DEATH CERTIFICATION

DATE FILED: MARCH 6, 2023

STATE FILE NUMBER: 124-23-0070

DECEDENT'S NAME: ALAN COSTELLO LANCASTER

DATE OF DEATH: JANUARY 28, 2023

DATE OF BIRTH: [REDACTED]

COUNTY OF DEATH: TEXAS

SSN: [REDACTED]

MARITAL STATUS: DIVORCED

SEX: MALE

EVER IN ARMED FORCES: NO

RESIDENCE ADDR: 6615 MINNESOTA AVE, ST LOUIS CITY, MISSOURI

SURV SPOUSE (PRIOR FIRST MARRIAGE):

FUNERAL HOME: PROFESSIONAL FUNERAL DIRECTORS SERVICE

CAUSE OF DEATH (ICD CODE): X851

MANNER: HOMICIDE

MIXED DRUG OVERDOSE - RAPID

XYLAZINE TOXICITY

FENTANYL TOXICITY

SIG COND: INCARCERATED AT TIME OF DEATH.

[Handwritten Signature]